May 18, 2004

(date)

| AMENDMENT TRANSMITTAL LETTER  |                                  |  |   |  |                             | 9                         | ATTORNEY'S DOCKET NO.<br>G-044US04DIV |                        |               |  |
|---|----------------------------------|--|---|--|-----------------------------|---------------------------|---------------------------------------|------------------------|---------------|--|
| ERIAL NO  | Te                               | UNG DATE   | TEX   | XAMINER  |                             |                           | GROUP ART UNIT                        |                        |               |  |
|   |                                  |  | Constantina T. Katcheves  |  | 1636                        |                           |                                       |                        |               |  |
| NVENTIO   | N                                |  |   | (DDD 65 J  | 70.1                        |                           |                                       |                        |               |  |
| hicleic Ac  | id Encoding a Re                 | tinoblaston  | a Buiding Protei  | n (KBP-7) and  | rotymorphi                  | C MAIKCIS AS              | sociated with                         | Said Mucie             | ic Acia       |  |
|   | COMMISSIC                        |  |   |  |                             | ation.                    |                                       |                        |               |  |
|   |                                  | 474 4.4  | -645  | _45  | 70001                       |                           |                                       | her a vea-             | i final       |  |
| ¢   |                                  |  | of this applically submitted.   | anon under .   | 57 CI'K 1                   | c/ nas occa               | estadusuca                            | by a vor               | HEA           |  |
| -   | Statemen<br>Application          | nt provious<br>nt alaime s   | mall entity st  | itus   |                             |                           |                                       |                        |               |  |
| Applicant claims small entity status.  A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed. |                                  |  |   |  |                             |                           |                                       |                        |               |  |
| Č   |                                  |  | is required.  |  |                             |                           | * 12107 *124                          | , 10 01.010            |               |  |
| _   |                                  |  | alculated as s  | hown below   | :                           |                           |                                       |                        |               |  |
| -   |                                  |  | - 1   |  |                             |                           |                                       |                        |               |  |
|   | (1) (2)                          |  |   | (3)  | SMALI                       | SMALL ENTITY              |                                       | OTHER THAN             |               |  |
|   |                                  |  |   |  |                             |                           |                                       | SMALL ENTITY           |               |  |
|   | CLAIMS<br>RIMAINING<br>AITEIR    |  | HIGHEST NO. PREVIOUSLY PAID FOR   | PRESENT<br>EXTRA   | RATE                        | ADDIT.<br>FER             | <u>OR</u>                             | RATE                   | ADDIT.<br>FEE |  |
| TOTAL.  | • 35                             | MINUS  | ** 20   | 15   | \$9                         | \$0.00                    |                                       | \$18                   | \$270.00      |  |
| NDEP.   | • 2                              | אטאוא  | ••• 3   | 0  | 543                         | \$0.00                    |                                       | \$86                   | \$ 0.00       |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 0  |                                  |  |   |  |                             | \$0.00                    |                                       | \$290                  | \$ 0.00       |  |
|   |                                  |  |   |  | Total<br>naklit.<br>fee     | \$0.00                    | <u>OR</u>                             | Total<br>addit.<br>fee | \$270.00      |  |
| ** If the I<br>*** If the I<br>The Hig  | A check coclosed                 | sly Paid Por I'<br>isly Paid For I'<br>Paid For (To<br>arge my Dej<br>in the amour | N THIS SPACE IS IN THIS SPACE is tal or Indep.) is the posit Account No | less than 20, ent<br>less than 3, entr<br>highest number<br>b. 19-0065 in th | or "3." found in the a      | \$_270.00<br>to co        | ver the filing t                      |                        |               |  |
| ſ   | Inc Contact The Contact This com | missioner is<br>nunication o   | hereby authorized   | ed to charge pa<br>payment to De   | yment of the<br>posit Accou | following feat No. 19-006 | es associated v<br>5. Two additi      | vith<br>onal           |               |  |
|   |                                  | ilus Letter a  Ki  | re enclosed.<br>y additional filin                                      | · face remised   | under 37 CE                 | 0116                      |                                       |                        |               |  |
|   |                                  |  | v acquinanai filini   |  | cumer set. C                | R. 1.171.1                |                                       |                        |               |  |